

FILED
07 JUN -4 PM 1:03
RICHARD W. WEEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

CARSHA C LIBBETT

Plaintiff,

vs.

Defendant.

CASE NO. 07 2884

SI
PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

(PR)

I, LIBBETT, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ☐ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary

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1 and wages per month which you received. (If you are imprisoned, specify the last place of
 2 employment prior to imprisonment.)

3 _____
 4 _____
 5 _____

6 2. Have you received, within the past twelve (12) months, any money from any of the following
 7 sources:

8 a. Business, Profession or Yes ___ No ☒
 9 self employment

10 b. Income from stocks, bonds, Yes ___ No ☒
 11 or royalties?

12 c. Rent payments? Yes ___ No ☒

13 d. Pensions, annuities, or Yes ___ No ☒
 14 life insurance payments?

15 e. Federal or State welfare payments, Yes ___ No ☒
 16 Social Security or other govern-
 17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount
 19 received from each.

20 _____
 21 _____

22 3. Are you married? Yes ___ No ☒

23 Spouse's Full Name: _____

24 Spouse's Place of Employment: _____

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ _____ Net \$ _____

27 4. a. List amount you contribute to your spouse's support : \$ _____

28 b. List the persons other than your spouse who are dependent upon you for support
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and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

5. Do you own or are you buying a home? Yes ___ No /

Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile? Yes ___ No /

Make _____ Year _____ Model _____

Is it financed? Yes ___ No ___ If so, Total due: \$ _____

Monthly Payment: \$ _____

7. Do you have a bank account? Yes ___ No / (Do not include account numbers.)

Name(s) and address(es) of bank: _____

Present balance(s): \$ _____

Do you own any cash? Yes ___ No / Amount: \$ _____

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No /

8. What are your monthly expenses?

Rent: \$ _____ Utilities: _____

Food: \$ _____ Clothing: _____

Charge Accounts:

| <u>Name of Account</u> | <u>Monthly Payment</u> | <u>Total Owed on This Acct.</u> |
|------------------------|------------------------|---------------------------------|
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No /

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

DATE

SIGNATURE OF APPLICANT

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Case Number: _____

CERTIFICATE OF FUNDS

IN

PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of _____ for the last six months at [prisoner name] _____ where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ _____ and the average balance in the prisoner's account each month for the most recent 6-month period was \$ _____.

Dated: _____

[Authorized officer of the institution]